# *Internship Application*
## *Office of Senator Charles E. Schumer*

## General Information

Last name                                    First and middle names

Permanent mailing address                                                         Phone numbers (include area code)

                                                                                  Permanent    (    )

City                              State        ZIP Code

                                                                                  Mobile        (    )

Current mailing address (effective until            )                             Phone number (include area code)

                                                                                  Current        (    )

City                              State        ZIP Code

## Education

College or university attending.

Name                                              Major(s)                        Year degree will be
                                                                                  received

City                    State      ZIP Code

                                                  Foreign languagues

## Internship opportunities (all internship are unpaid/housing is not provided)

Please circle location(s) where you would prefer to complete your internship (may choose more than one).

| | | |
|---|---|---|
| Albany | Hudson Valley | Rochester |
| Binghamton | Long Island | Syracuse |
| Buffalo | New York City | Washington |

## Availability

Circle term for which you are applying.                    Summer          Fall          Spring

Please indicate dates of availability.                              to

| Day | Hours |
|---|---|
| Monday | |
| Tuesday | |
| Wednesday | |
| Thursday | |
| Friday | |

Please circle days and indicate hours which you would be available.

**I certify** that, to the best of my knowledge and belief, all of the information on and attached to this application is true, correct, complete and made in good faith.    **I understand** that false or fraudulent information on or attached to this application may be grounds for not hiring me or firing me after I begin work.

**SIGNATURE**                                          **DATE SIGNED**